SPONSORSHIP APPLICATION

2006 MONTANA GOVERNOR'S CONFERENCE ON TOURISM & RECREATION

Best Western Heritage Inn • Great Falls, Montana April 10-11, 2006

Sponsor Registration	Sponsorship Levels
Company Name (Please type or print) Contact Name	Representative(s) attending conference - as name(s) should appear on name badge:
Address City State Zip Phone Fax Email Web Address	Sponsorship level and item or event you wish to sponsor (see attached information):
Address for Listing in Conference Notebook (if different from above): Address City State Zip Phone Fax Email Web Address	Level Item or Event
Sponsor Information	Method of Payment
Please provide a brief description (4-6 lines) of your organization/business to be included in the conference notebook. Submissions must be received by March 6 th to be included in the notebook. Remember to proofread and edit; the language will be typeset exactly as it reads on this paper. (Applications received by <u>February 10</u> th will also be listed in the initial registration brochure mailing.)	Card Number Expiration Date Card Auth. Code Cardholder's Name (Print clearly)
	Cardholder's Billing Address
	City, State ZIP Cardholder's Signature Make all checks payable to and send application to: Governor's Conference on Tourism & Recreation c/o RMS Management Services 36 South Last Chance Gulch, Suite A Helena, MT 59601 Phone: 406-443-1160 Fax: 406-443-4614